NY STATE CLIENT BUSINESS RELATIONSHIP FORM

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FOR OFFICE USE ONLY

RECEIVED JAN 1 6 2015

Il Client Information				
Name: The Travelers Indemnity Company				
Permanent Business Address: One Tower Square				1
City: Hartford	State: CT	ZIP code: 0618	3	4
Phone: 860-954-9176	The second s	entrumente estatuen de de mande de de mande de de mande de la compacta de la compacta de la compacta de la comp		the second secon

Business Relationship with an Er	ntity onship is with an entity if the	Relationship is with a Sta	ale Reison, skip ihis seciloi
Entity Name: Hiscock and Barclay, LLP			
Entity Address: One Park Place - 300 South State St	reet	okusi nekakulukin Pitikal di Milmendukunda milepohisi Pikhilalina sherisi 2004 at Pisi 1746a mma isti 1842 200	الأعطال على مناطق الكامسية في مناطق الأعطال الكاملية
City: Syracuse	State: NY	ZIP	code: 13202
Phone: 315-425-2700		1	- The Transition T of Land Interface page consistency consisting consisting of the second section
State Person with the Requisite involvement in	n the Entity:		- A allian an man ann a 190 ag - 19 Ag mill - 19 - 19 Ag mill - 19 Ag
Last name: Breslin	First 'name:	Neil D.	· · · · · · · · · · · · · · · · · · ·
State Person's Agency or Legislative Body of	Employment: N.Y. State Sen	ate	- Anna transference - State September (September (Septe
Public Office Address: 172 State Street, Room 414	4, Capitol		
City: Albany	State: NY	ZIP	code: 1 224 7
Phone: 518-455-2225	tine		
Check here if using addendum sheet for add	itional State Person(s) with	the Requisite Involve	ment in the Entity: 🛛
Description of Business Relationship(s): Mr. Bresl	lin is "of Counsel" to Hiscock a	nd Barclay, LLP. Hiscock ar	nd Barclay, LLP provide lega
services to Travelers and its insureds.			**************************************
		*The amount below r	epresents payments made
	от често по те бил до обба в досто до общени от	from 1/1/2011 thro	ugh 12/31/14.
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End date of Business Relationship (Actual or A	anticipated) if applicable:	Month:n/a	Year:
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Designated Addendum Sheet for Sections III and IV

Please use the following addendum pages as continuation for the specified sections: If additional space is needed, please make a copy of this sheet.

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City:	State:		ZIP code:	
Phone:	8			
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Last name:	First name:			
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Phone:	-	-	обы, 4 km (1944-) обы до обы другия (1940-) и борого в Менге до горого в се подоводи и положения и положения о	
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Entity Name: Hiscock and Barclay, LLP.		and the state of t	and the second of the second o	
Entity Address: One Park Place - 300 South State Street City: Syracuse	State: NY	Annual American Company of the Compa	ZIP code: 13202	
Phone: 315-425-2700	Sidie. N1	MALI I MALI CAMBO L	211 COGE. 13202	
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Public Office Address: LOB 521 City: Albany	Statesan		7ID codo: 12240	
	State: NY		ZIP code: 12248	
Phone: 518-455-5814				

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Public Office Address:	MINISTER AND	мания при 3-4 дистипация и при отписания по	PRINCIPLE UNIVERSALITATION CONTRACTOR CONTRA		
City:	State:		ZIP code:	a Malika i a prinsimina y salah	
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Expenses (Actual or Anticipated):	\$.00			
Total Compensation and Expenses (Actual o	or Anticipated):	\$.00	5	
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End date of Business Relationship (Actual or	Anticipated) if applicable:	Month:	Year:		
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	ditional State Person(s): O				
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	Administrative Officer. If th	e Ghief Admin 1 this Declarati	istrative Officer, for any on.) (See instructions.)		
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NY STATE CLIENT BUSINESS RELATIONSHIP FORM

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Client Information		0 1950 M	
Name: The Travelers Indemnity Company	anggapang Majaranda danggapa dangdilana ara majaranda majaranggan ang maganan mana maganapa ara sa gamana ana		ுர்களில் இந்த நாட்டிர்களில் மது இடித்தின் அளிறியே அந்த நில் நில் நாட்டிரும் இந்த மாது நாட்டிருந்து மற்று முறிய இந்த இந்த நில் இந்த நாட்டிரின் இதியை இதிய இதிய அந்த நில் நில் நாட்டிருந்த நாட்டு நாட்டிருந்து நாட்டிருந்த நில்
Permanent Business Address: One Tower Square			
City: Hartford	State: CT	ZIF	² code: 06183
Phone: 860-954-9176		3	
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Entity Name: Bel Associates	n 1994 N. Kr. A. Landram and Schauf all van 24 koop voord. 1994 room een 200 val de Lord A. Reinsch i Commisse (de 1 M. 1884 van I	annead a' contiè maria da ca talen a mitore, est de antica de Christian e d'antica de antica de antica de antic	المرتب والمراجع بالإراكات (معان الما المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع المراجع ا
Entity Address: 1717 State Street	in 1988 had an electric element of the state	Company of the second section of the second second second second section second section section second section second section second section second section se	
City: Watertown	State: NY		P code: 13601
Phone: 315-788-4525		and the state of t	
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Last name: Blankenbush	First name: K		A COMMANDER O BY THE BUTTON OF THE STATE STATE STATES AND ADDRESS
State Person's Agency or Legislative Body of	Employment: N.Y. State Asser	nbly	
Public Office Address: LOB 322			
City: Albany	State: NY	<u>: 4</u> 1	P code: 12248
Phone: 518-455-5797			
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Description of Business Relationship(s): Indepen	ident insurance Agency authori	zed to sell Travelers in	surance products.
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Total Compensation and Expenses (Actual or	r Anticipated):	\$ 92,828.	19* .00
Beginning date of Business Relationship (Actu	ual or Anticipated):	Month:	Year:
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Designated Addendum Sheet for Sections III and IV

Please use the following addendum pages as continuation for the specified sections, if additional space is needed, please make a copy of this sheet.

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Instructions: Fill out this section only if the Relation and fill out Section IV.	iship is with an Entity. If the i	elationship is	with a State Per	on skip ins	section
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Entity Name: The Insurance Center, Stephen M. Hawl	ey & Assoc. LLC		MARIA I SA	<u> </u>	(Section)
Entity Address: 50 Main Street		Towns of the second	With the state of	VIII TONO	
City: Batavia	State:NY	Alabama Arabama da marana manana sa	ZIP code:1	4020	
Phone:585-343-2282	i kanana angagangan pangangan pangangan pangangan pangangan pangangan pangangan kan asalamban pa		man milenni senu puma minina ang ansaran	manifer homeome in a manifer is the state of	
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Last name: Hawley	First name: St	ephen M.	MINISTER AND THE PROPERTY OF T	materia i Military () en e resentante e reconstantante m	######################################
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City: Albany	State:NY		ZIP code:1	2248	Mendanananan
Phone: 518-455-5811	*	M-b),	ware a factor of the same of t		
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